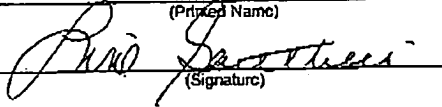


Atty. Dkt. No. 022726-0201

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: MADISON et al.
Title: TARGETED
THERAPEUTIC OR
DIAGNOSTIC AGENTS
AND METHODS OF
MAKING AND USING
SAME
Appl. No.: 09/091,578
Appl. Filing Date: 10/6/1998
Examiner: Schwadron, Ronald B.
Art Unit: 1644

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. Line Gauthier (Printed Name)  (Signature) November 15, 2004 (Date of Deposit)

RECEIVED
CENTRAL FAX CENTER
NOV 15 2004

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)**Enclosed are:**

- ☒ [X] Amendment/Reply (11 pages).
☒ [X] Two (2) Reference (15 pages).

-1-

BEST AVAILABLE COPY

Atty. Dkt. No. 022726-0201

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	18	- 73	= 0	x \$18.00	= \$0.00
Independents	1	- 5	= 0	x \$88.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$300.00	= \$0.00
CLAIMS FEE TOTAL:					= \$790.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/> Extension for response filed within the first month:	\$110.00	1	\$110.00
<input type="checkbox"/> Extension for response filed within the second month:	\$430.00		\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$980.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,530.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,080.00		\$0.00
EXTENSION FEE SUBTOTAL:			\$110.00
EXTENSION FEE ALREADY PAID:			\$0.00
EXTENSION FEE TOTAL			\$110.00
CLAIMS AND EXTENSION FEE TOTAL:			\$900.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):			\$450.00
<input type="checkbox"/> Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:			\$450.00

☒ Please charge Deposit Account No. 50-0872 in the amount of \$450.00. A duplicate copy of this transmittal is enclosed.

☐ A check in the amount of \$450.00 to cover the filing fee is enclosed.

Atty. Dkt. No. 022726-0201

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date November 15, 2004

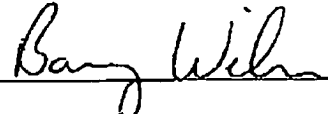
FOLEY & LARDNER LLP

Customer Number: 30542

Telephone: (858) 847-6717

Facsimile: (858) 792-6773

By



Barry S. Wilson

Registration No. 39,431

For Richard W. Warburg

Attorney for Applicant

Registration No. 32,327



RECEIVED
CENTRAL FAX CENTER

NOV 15 2004

FOLEY & LARDNER LLP
ATTORNEYS AT LAW

11250 EL CAMINO REAL, SUITE 200
SAN DIEGO, CA 92130
P.O. BOX 80278
SAN DIEGO, CALIFORNIA 92138-0278
TELEPHONE: 858.847.6700
FACSIMILE: 858.792.6773
WWW.FOLEY.COM

FACSIMILE TRANSMISSION

Total # of Pages 33 (including this page)

TO:	PHONE #:	FAX #:
Commissioner For Patents U.S. Patent and Trademark Office		703.872.9306

From : Barry S. Wilson
Date : November 15, 2004
Client/Matter No : 022726-0201
USSN : 09/091,578
Filing Date : 10/6/1998
Examiner : R. Schwadron
User ID No : 3067

OFFICIAL

Transmitted herewith for filing in the above-referenced application is the following:

- 1) RCE Transmittal (3 pages) in Duplicate
- 2) Amendment (11 pages)
- 3) Two (2) References (15 pages)

Thank you.

If there are any problems with this transmission or if you have not
received all of the pages, please call (858) 847-6756.

Operator:	Time Sent:	Return Original To: Line S. Gauthier
-----------	------------	---

CONFIDENTIALITY NOTICE: THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS INTENDED ONLY FOR THE PERSONAL AND CONFIDENTIAL USE OF THE DESIGNATED RECIPIENTS NAMED ABOVE. THIS MESSAGE MAY BE AN ATTORNEY-CLIENT COMMUNICATION, AND AS SUCH IS PRIVILEGED AND CONFIDENTIAL. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR ANY AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT YOU HAVE RECEIVED THIS DOCUMENT IN ERROR, AND THAT ANY REVIEW, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US BY MAIL. THANK YOU.

DUPLICATE

Atty. Dkt. No. 022726-0201

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: MADISON et al.

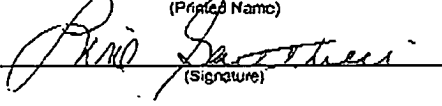
Title: TARGETED
THERAPEUTIC OR
DIAGNOSTIC AGENTS
AND METHODS OF
MAKING AND USING
SAME

Appl. No.: 09/091,578

Appl. Filing Date: 10/6/1998

Examiner: Schwadron, Ronald B.

Art Unit: 1644

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. Line Gauthier (Printed Name)  (Signature) November 15, 2004 (Date of Deposit)

RECEIVED
CENTRAL FAX CENTER
NOV 15 2004

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)Enclosed are:

- ☒ Amendment/Reply (11 pages).
- ☒ Two (2) Reference (15 pages).

DUPLICATE

Atty. Dkt. No. 022726-0201

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	18	- 73	= 0	x \$18.00	= \$0.00
Independents	1	- 5	= 0	x \$88.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$300.00	= \$0.00
CLAIMS FEE TOTAL:					= \$790.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/> Extension for response filed within the first month:	\$110.00	1	\$110.00
<input type="checkbox"/> Extension for response filed within the second month:	\$430.00		\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$980.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,530.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,080.00		\$0.00
EXTENSION FEE SUBTOTAL:			\$110.00
EXTENSION FEE ALREADY PAID:			\$0.00
EXTENSION FEE TOTAL			\$110.00
CLAIMS AND EXTENSION FEE TOTAL:			\$900.00
<input type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above):			\$450.00
<input type="checkbox"/> Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:			\$450.00

☒ Please charge Deposit Account No. 50-0872 in the amount of \$450.00. A duplicate copy of this transmittal is enclosed.

☐ A check in the amount of \$450.00 to cover the filing fee is enclosed.

DUPLICATE

Atty. Dkt. No. 022726-0201

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date November 15, 2004

FOLEY & LARDNER LLP
Customer Number: 30542
Telephone: (858) 847-6717
Facsimile: (858) 792-6773

By Barry S. Wilson

Barry S. Wilson
Registration No. 39,431
For Richard W. Warburg
Attorney for Applicant
Registration No. 32,327

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- ☐ **BLACK BORDERS**
- ☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- ☐ **FADED TEXT OR DRAWING**
- ☐ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- ☐ **SKEWED/SLANTED IMAGES**
- ☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- ☐ **GRAY SCALE DOCUMENTS**
- ☐ **LINES OR MARKS ON ORIGINAL DOCUMENT**
- ☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- ☐ **OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.